

L16000071144

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

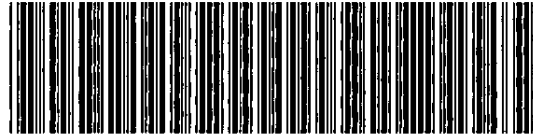
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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REGISTERED STATE
CLERK OF SUPERIOR COURT
JANUARY 2017

APR 19 2017
J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Samsara Industries LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Mike Nussbaum
Name of Person

Firm/Company

7300 W. CAMINO REAL STE 200
Address

Boca Raton FL 33433
City/State and Zip Code

M.NUSSBAUM@ETCFL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MIKE NUSSBAUM at (561) 777-2024
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$25.00 Filing Fee ☐ \$30.00 Filing Fee & Certificate of Status ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Samsara Industries LLC

Page 1 of 3

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager
AMBR = Authorized Member

| <u>Title</u> | <u>Name</u> | <u>Address</u> | <u>Type of Action</u> |
|--------------|-----------------|------------------------------------|--|
| AMBR | MIKE NUSSBAUM | 5201 VAN BUREN RD. | <input checked="" type="checkbox"/> Add |
| | | DELRAY BEACH, FL 33484 | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| MGR | GREGORY, GUYINS | | <input type="checkbox"/> Add |
| | | 138 SW 12 TH AVE DELRAY | <input checked="" type="checkbox"/> Remove |
| | | BEACH, FL 33444 | <input type="checkbox"/> Change |
| | | | <input type="checkbox"/> Add |
| | | | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
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STATE OF FLORIDA

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

[illegible]

E. Effective date, if other than the date of filing: _____ (optional)

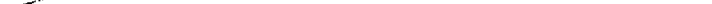
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated



Signature of a member or authorized representative of a member

Mike Nossbaum

Typed or printed name of signee

17 APR 17 AM 12:04

FILED
U.S. DISTRICT COURT
SOUTHERN DISTRICT OF NEW YORK